Ĭ.				RCE 12/17/04									
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003								Application or Docket Number					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAN TYPE OR SMALL ENTIT					
TOTAL ÇLAIMS				· · · · · ·	100.0		Ĺ	RATE	FEE	ם ר	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		E	BASIC FEE	1	OR	BASIC FEE		
TOTAL CHARGEABLE CLAIMS			2 / minus 20=		• /			X25		1	11110	7.10	
INDEPENDENT CLAIMS			3 minus 3 =		•		<u></u>		OR				
М	JLTIPLE DEPE	NDENT CLAIM P					-	XIBO	<b></b>	OR	XXXO		
								+180		OR	+360		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	First	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER		
AMENDMENT A		(Column 1) CLAIMS		HIGH	EST	(Column 3)	ľГ		ADDI-	7		ADDI-	
		REMAINING AFTER AMENDMENT		PREVIO PAID I	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=	2	(×2:5)		OR	X50		
	Independent <sub>.</sub>	4 .	Minus	***			V	700		OR	X200		
	FIRST PRESE	NTATION OF MI	ULTIPLE DE	PENDENT	CLAIM		^			1	1×221=0	·	
٠.							Ľ	TOTAL		OR	TOTAL		
• •	(Column 1) (Column 2) (Column 3)						AD	DIT. FEE		JOR	ADDIT. FEE		
AENT B		CLAIMS REMAINING AFTER AMENDMENT	-	HIGHE NUME PREVIO PAID F	EST BER FUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MON	Total '	<u>*</u>	Minus	##	· .	=	l ly	25		OR	X50	• • •	
AMENDN	Independent	*	Minus	***	•	=		100	•	OR	X 20-0		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								·		3		
							. [#	TOTAL		OR	X360	*	
								DIT. FEE		OR	ADDIT. FEE		
	,	(Column 1) CLAIMS		(Colum HIGHE		(Column 3)		<del></del>	4001	•		ADDL	
AMENDMENT C		REMAINING AFTER AMENDMENT	•	NUMB PREVIÓI PAID F	USLY	PRESENT EXTRA	1	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	44		=	Ϋ́	25		OR	X 50		
	Indep ndent	•	Minus	***		=		100		OR	X200	1.	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	ENDENT	CLAIM					Ì			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										£	+360		
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  OR  ADDIT. FEE  OR  ADDIT. FEE													
		ber Previously Paid					found	in the appr	ropriate box	in col	ımn 1.		

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